



Fax

Attention: Mail Stop ISSUE FEE	From: Travis Dodd
Fax: (571) 273-2885	Fax: (818) 833-2065
Examiner's Phone:	Phone: (818) 833-2014
Company: United States Patent and Trademark Office	Company: Quallion LLC
Re: Application Serial No. 10/666,790	Pages: 5
Filing Date: September 17, 2003	
Confirmation No. 9005	
Inventor(s): Hisashi Tsukamoto et al.	
Examiner: Cynthia Lee	
Group Art Unit: 1795	
for ELECTRIC STORAGE BATTERY CONSTRUCTION AND METHOD OF MANUFACTURE	
Our File No. Q137-US8	

☐ Urgent ☒ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

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- Transmittal of Payment of Issue Fee (Small Entity) (1 page)
- Fee Transmittal (1 page)
- PTOL-85 (Rev. 11/03) Part B. - Fee(s) Transmittal (1 page)
- Form PTO-2038, credit card authorization (1 page)

Lisa K. Robbins

(Name of Person Signing Certificate)

(Signature)

Quallion LLC

PO Box 923127, Sylmar, CA 91392-3127 • PH: (818) 833-2000 • FAX: (818) 833-2065

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/666,790	
	Filing Date	September 17, 2003	
	First Named Inventor	Tsukamoto, Hisashi et al.	
	Group Art Unit	1795	
	Examiner Name	Cynthia Lee	
Total Number of Pages in This Submission		Attorney Docket Number	Q137-US8

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Authorized Amendment After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Copy of Assignment Papers and Recordation (for an Application) Drawing(s) Licensing-related Papers Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <input checked="" type="checkbox"/> Issue Fee
Remarks _____		

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The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0921. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Dated: 8/26/2009

Phone: (818) 833-2003
Fax: (818) 833-2065By: Travis Dodd
Attorneys for Applicant(s)
P.O. Box 923127
Sylmar, CA 91382-3127**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231 on this date: _____

Typed or printed name

TRAVIS DODD

Signature

Date

**FEE TRANSMITTAL**

Attorney Docket No.	Q137-US8
First Named Inventor:	TSUKAMOTO, Hisashi et al.
Application Number	10/666,790
Filing Date:	September 17, 2003
Examiner Name:	1795
Group/Art Unit:	Cynthia Lee

TOTAL AMOUNT OF PAYMENT:	\$ 1,055.00
METHOD OF PAYMENT (check One)	1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to: Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC <input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17 2. <input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other - Credit Card

2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$330.00	\$165.00	\$0.00
Total Claims	41 - 41 =	0	X \$52.00	X \$26.00	\$0.00
Independent Claims	2 - 3 =	0	X \$220.00	X \$110.00	\$0.00
Multiple Dependent Claim(s) (if applicable)			\$390.00	\$195.00	\$0.00
Total of above Calculations =					\$0.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$220.00	\$110.00	\$0.00
Reissue filing fee	\$330.00	\$165.00	\$0.00
Provisional filing fee	\$220.00	\$110.00	\$0.00
Total of above Calculations =			\$0.00

3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
Issue Fee	\$	\$755.00	\$755.00
Publication Fee	\$	\$300.00	\$300.00
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$1,055.00

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature		Date	8/26/2009